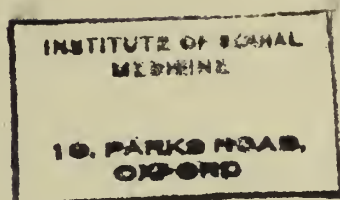


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JOINT COUNTY COUNCIL OF MOLAY & HALLE

R E P O R T

by .

The Medical Officer of Health

for

1 9 5 1.

Joint County Council of Moray and Nairn.

PUBLIC HEALTH DEPARTMENT.

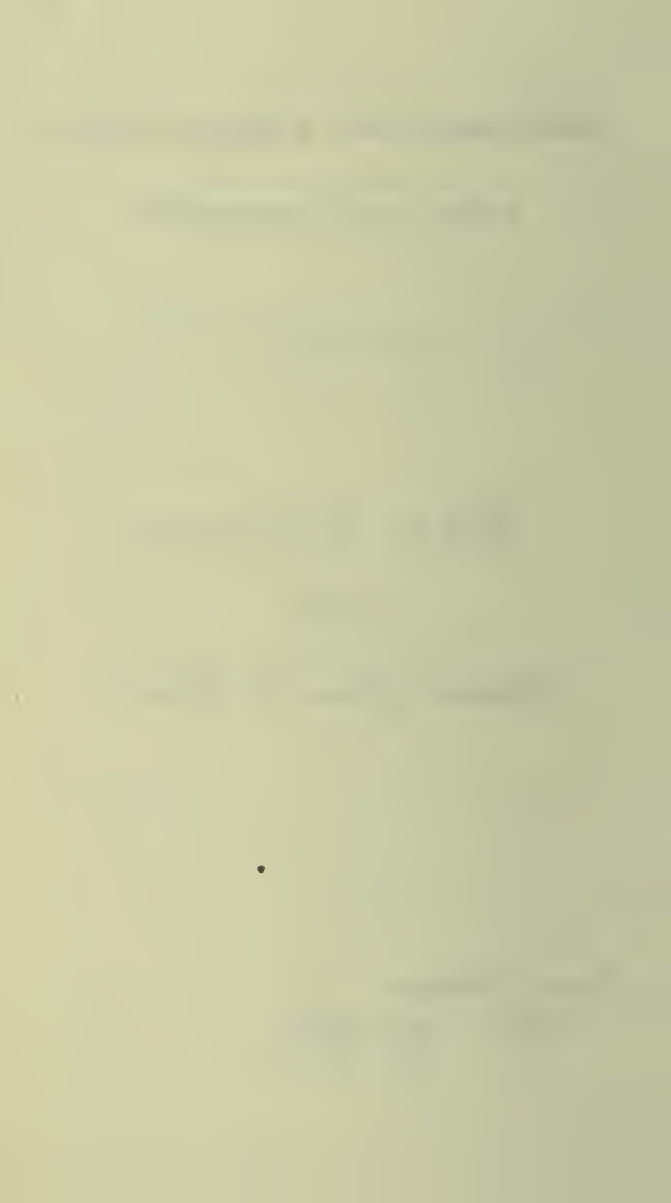
FOR INFORMATION

*With the Compliments
of the
Medical Officer of Health.*

County Buildings,

Elgin.

2- DEC



County Buildings,

Elgin.

November, 1952.

To

The Secretary, Department of Health for Scotland,
The Joint County Council of Moray and Nairn,
The Moray County Council,
The Nairnshire County Council,
The Town Councils of Burghead,
Elgin,
Forres,
Grantown-On-Spey,
Lossiemouth,
Nairn,
Rothies.

My Lords, Ladies and Gentlemen,

I have the honour to submit to you my Annual Report on the Public Health of Moray and Nairn for the year ending 31st December, 1951.

The Report is mainly statistical in character with contents and attempted interpretations.


Yours faithfully,



Medical Officer of Health.

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PRINCIPAL VITAL STATISTICS.

Population

Estimate at middle of 1951	57,606
1951 Census	56,930

Births, Deaths and Marriages

Total Live Births, corrected for transfer	1,049	18.4 per 1,000 population.
Legitimate	975	92.8% total live births.
Illegitimate	74	3.0% total live births.
Total Stillbirths, corrected for transfer	32	29.6 per 1,000 total births.
Marriages	401	6.9 per 1,000 population.
Deaths, all causes, corrected for transfer	704	12.2 per 1,000 population.
Tuberculosis (all forms)	15	26.0 per 100,000 population.
Tuberculosis (Respiratory)	15	26.0 per 100,000 population.
Principal Epidemic Diseases	10	17.3 per 100,000 population.
Children under 1 year	34	32.4 per 1,000 live births.
Women in Childbirth	-	- per 1,000 total births.

Causes of Death.

Deaths from Tuberculosis show a decline of nearly a quarter over the previous year, but remain within the limits of previous experience. For the first time, no death from non-respiratory tuberculosis was recorded.

Deaths from infectious diseases other than influenza, have virtually disappeared.

The communicable respiratory diseases caused one death less than in 1950.

Deaths due to cancer and other malignant diseases declined by one tenth.

Diseases of the heart and arteries, nephritis, and cerebral haemorrhage appear to have increased in frequency. This may be the case, but an alteration in the method of grouping causes of death may also be a factor.

Age Incidence of Deaths.

0	1	5	10	15	25	35	45	55	65	75	85
1	4	9	14	24	34	44	54	64	74	84	+
34	3	3	3	14	18	19	40	67	184	225	34

CARE OF MOTHERS AND YOUNG CHILDREN

(a) Ante-natal and Post-natal Clinics.

The clinics at Forres and Nairn Hospitals have been maintained, and that Elgin commenced operations in the course of the year.

	<u>Ante-natal</u>	<u>Post-natal</u>
Number of cases attending		
Elgin.	Not available	Not available
Forres.	222	38
Nairn.	135	-

(b) Child Welfare Clinics.

The Clinic in Elgin continued in operation until the end of the year. With the transfer of Naval personnel to the Married Quarters in Elgin, the clinic at Milltown became redundant and was closed. The clinic at Kinloss continued.

	<u>Under 1 Year</u>	<u>Over 1 year</u>
Children attending during 1951	110	1
Total Attendances	1,514	51

(c) Dental Care.

None provided in 1951.

(d) Mother and Baby Homes.

None in Moray and Nairn.

(e) Day Nurseries.

(f) Residential Nurseries
Children's Homes.

There are none.

(g) Nurseries and Child-Minders Regulation Act, 1948.

No registrations have been effected under this Act.

MIDWIFERY SERVICES.

(a) Total number of Births notified
including Stillbirths (uncorrected)

1,007

(b) Births according to classification

(i) Under Section 23(2)
of the National Health Service
(Scotland) Act, 1947

242

(a) Doctor engaged and present

158

(b) Doctor engaged and not present

84

(c) No doctor engaged

Nil

(ii) Other domiciliary cases

Nil

(iii) Cases in institutions in Moray
and Nairn.

765

VISITATION BY HEALTH VISITORS.

	<u>Initial Visits</u>	<u>Total Visits</u>
Expectant mothers visited by <u>Health Visitors</u>	278	1,783
Infants	982	10,040
Children (1- 5 years)	613	3,515
School Children		
At request of family doctor	-	-
At request of hospital	-	-

HOME NURSING.

Cases attended in their own homes under Section 25, National Health Service (Scotland) Act, 1947.	3,483	53,645
---	-------	--------

HOME HELP SCHEME.

Under consideration	-	-
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INFANT MORTALITY AND STILLBIRTHS.

Causes of Stillbirth, uncorrected for residence.

	1941 1945	1946 1950	1951
Accidents of Delivery	8.6	8.2	12
Congenital Malformation	5.2	5.4	2
Ante-partum Haemorrhage	1.0	2.4	1
Acute Toxaemia of Mother	3.0	1.0	1
Chronic Disease of Mother	1.2	0.6	-
Premature Birth	-	-	1
Other Causes	12.2	5.4	7
Total	31.2	25.0	24

Births, Stillbirths and Infant Deaths
by Totals and Rates, 1931 to 1951.

	Average 1931 to 1940	Average 1941 to 1945	Average 1946 to 1950	1951
Live Births	886	1018	1120	1049
Stillbirths	-	31	30	32
Total Births	-	1049	1150	1081
Deaths under 1 year	60	58	49	34
Birth Rate	18.1	20.0	20.2	18.2
Stillbirth Rate	-	29.5	25.9	29.5
Infant Mortality Rate	67.7	56.9	43.9	32.4

Causes of Infant Mortality in the First Month of Life

	Average 1936 to 1940	Average 1941 to 1945	Average 1946 to 1950	1951
Premature Birth	12.0	12.0	17.2	10
Congenital Debility	6.6	5.0	1.4	1
Congenital Malformation	4.2	8.2	4.6	6
Accidents of Delivery	2.4	5.4	4.2	5
Respiratory Disease	2.2	2.0	0.2	-
Alimentary Disease	0.8	-	0.6	-
Other Causes	2.2	3.0	0.8	-
TOTAL	31.4	35.4	29.0	22

Causes of Infant Mortality, One Month to One Year.

	Average 1936 to 1940	Average 1941 to 1945	Average 1946 to 1950	1951
Premature Birth	0.8	0.2	0.2	-
Congenital Debility	4.2	0.4	0.4	1
Congenital Malformation	0.6	1.2	1.4	3
Accidents of Delivery	-	-	-	-
Respiratory Disease	14.0	11.8	7.6	6
Alimentary Disease	2.8	3.6	2.2	-
Other Causes	6.8	5.6	6.0	3
TOTAL	29.2	22.8	17.8	13

The foregoing tables demonstrate certain facts concerning the causes of loss of infant life.

1. Respiratory and alimentary diseases are taking a very much smaller roll, no doubt due to better hygiene and medical treatment.
2. Congenital debility is a less frequent cause of infant death. This is a condition generally thought to result from maternal ill health or undernourishment. It is therefore significant that causes of stillbirth due to maternal disease show a parallel downward trend.
3. Congenital malformations in live-born children are, however, more frequent than before the war. The cause is not obvious.
4. Prematurity of birth, also previously deemed to be due to maternal ill-health, shows no sign of diminution. The finding suggest that hygiene, nourishment and care of the pregnant woman do not influence the viability of the child, other things being equal.
5. Accidents of delivery cause a greater loss than before the war, both in stillbirths and in deaths under a month. This calls for a searching inquiry into the standards of obstetrical care. As the majority of births occur in hospitals, this inquiry should be made by the Hospital Boards.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

TUBERCULOSIS.

Notifications in 1951.

	<u>Respiratory.</u>	<u>Non-Respiratory</u>	<u>Total</u>
Adults - Male	58	5	43
- Female	39	7	46
Children - Male	4	2	6
- Female	2	2	4
Total	<u>83</u>	<u>16</u>	<u>99</u>

Admission to Hospitals

Adults - Male	27	1	28
- Female	30	2	32
Children - Male	-	2	2
- Female	<u>-</u>	<u>-</u>	<u>-</u>
Total	57	5	62

Discharges

Adults - Male	25	1	26
- Female	25	1	26
Children - Male	-	1	1
- Female	<u>-</u>	<u>-</u>	<u>-</u>
Total	50	3	53

Deaths

Adults - Male	12	2	14
- Female	4	-	4
Children - Male	-	-	-
- Female	<u>-</u>	<u>-</u>	<u>-</u>
Total	16	2	18

VACCINATION AND IMMUNISATION.

Notifications of Vaccination in 1951 were as follows:-

	<u>Primary</u>	<u>Secondary</u>
Typical Vaccinia	907	177
Accelerated Reaction	9	42
Reaction of Immunity	5	175
No Local Reactions	<u>47</u>	<u>33</u>
Total Vaccinations notified.	1,395	

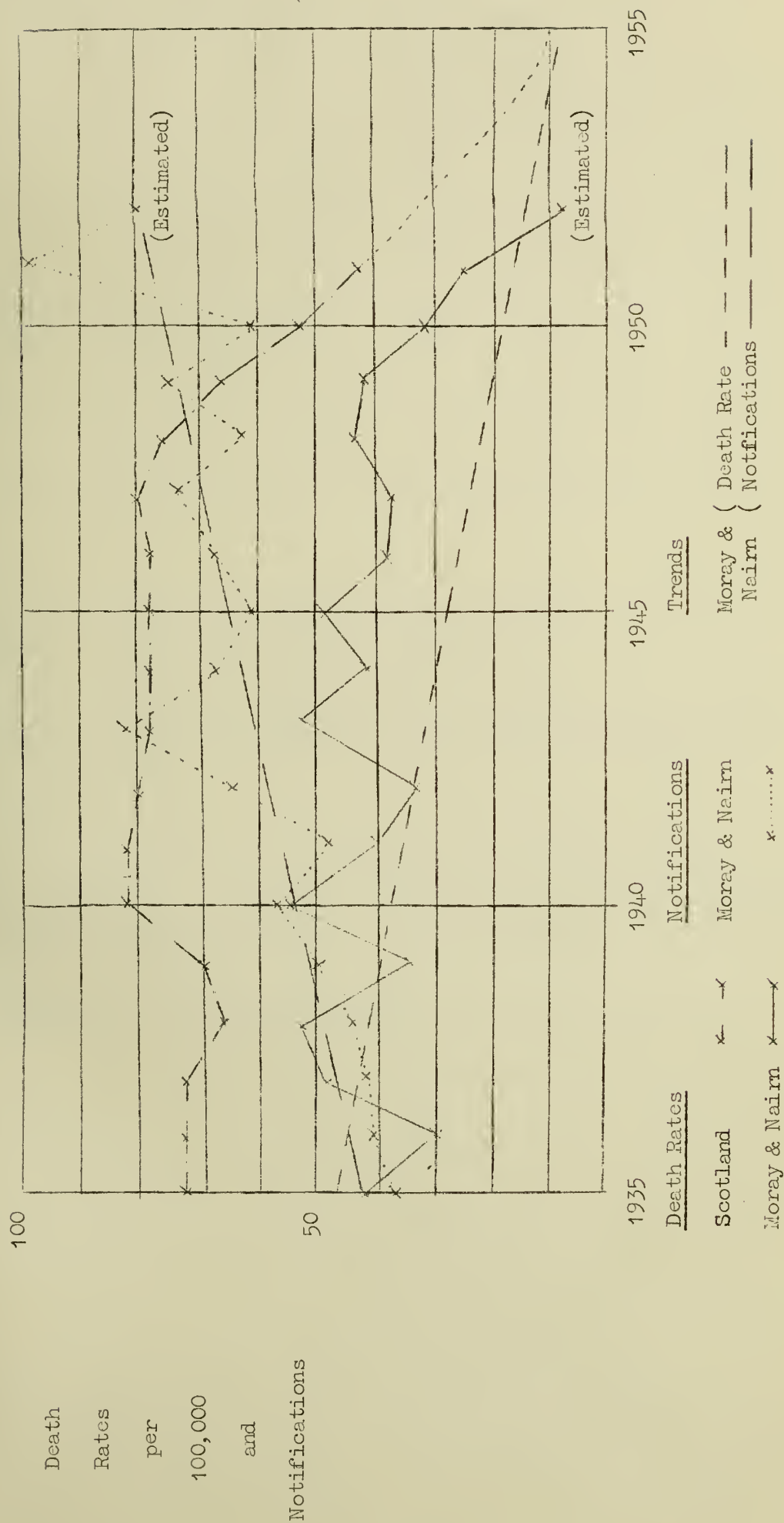
Notifications of Immunisations in 1951 were as follows:-

<u>Year of Birth</u>	<u>Primary</u>	<u>Reinforcement.</u>
1951	56	-
1950	590	-
1949	195	-
1948	26	-
1947	15	2
1946	13	72
1945	10	184
1944	5	91
1943	9	25
1942	-	9
1941	-	2
1940	-	-
1939	-	-
1938	1	2
1937	-	-
1936 or earlier	<u>4</u>	<u>6</u>
Total	<u>924</u>	<u>393</u>

The number of primary vaccinations and immunisations must be considered in relation to the total live births. For this year, the former are approximately 90% of the latter, which is satisfactory provided it is maintained.

Death rates from Tuberculosis in Scotland and Moray and Nairn.

Notifications of Tuberculosis in Moray and Nairn.



1. Location of Disease.

Percentage of Notifications in each Category.

	1931-35	1936-40	1941-45	1946-50	1951
Respiratory	52.5	59.5	66.5	76.0	83.6
Abdonimal	7.5	6.5	6.0	4.0	3.1
Bones and Joints	14.0	10.0	6.0	7.0	4.1
Other	26.0	24.0	21.5	13.0	9.2
TOTAL	100.0	100.0	100.0	100.0	100.0

The happenings of the year 1951, in respect of tuberculosis, in Moray and Nairn, give no grounds for complacency, rather the reverse.

Notifications were the highest on record at 99. It is true that 14 of these were subsequently shown not to be suffering from tuberculosis, but 85 new cases in a year, or one for every 670 of the population is an uncomfortably high rate for a rural and small-town population.

Deaths remain within the limits of previous experience, that is to say, there is no sign as yet that Moray and Nairn are sharing in the national improvement evident since 1948. On the other hand, the ratio between notifications and deaths has become much more favourable. It is to be hoped that the increased notifications will mean that fewer cases are left to spread the disease unknowingly, and that this in its turn will lead to a lower death rate.

There is nothing to add to the recommendations, in my previous report, aimed at hastening the departure of this unwelcome guest.

Contact Investigation and B.C.G. Vaccination.

Contacts seen for the first time during the year.

	<u>1950</u>	<u>1951</u>
Adults - male	19	38
- female	18	65
Children - male	31	27
- female	<u>37</u>	<u>27</u>
Total	105	157
X-ray examinations	80	395
Skin tests - Positive - Adult	3	47
- child	39	64
negative - adult	2	23
- child	<u>27</u>	<u>35</u>
Total	71	169
Contacts found to be suffering from tuberculosis	1	7
Adult contacts who refused examination.	5	41
B.C.G. Vaccinations.		
Nurses - male	-	-
- female	1	9
Students - male	-	-
- female	-	-
Contacts - Male	11	18
- female	<u>9</u>	<u>14</u>
Total	21	41

(Figures for Moray
only)

VENEREAL DISEASE.

New Civilian Cases admitted to Clinics in Aberdeen, 1951.

Syphilis			Chan- croid	Gonorrhoea			Other V.D.	Total V.D.	Not V.D.
Ac- quired	Congen- ital	Total		gen- ital	ophth- almia	Total			
5	3	8	-	3	-	3	4	15	9

Particulars of In-patients and Out-patient Attendances.

No. of In-patients

Days in Hospital

Out-patient attendances.

20

389

205

CONTROL OF INFECTIOUS DISEASE.

Table of Notifications.

Disease	1931 1940	1941 1945	1946 1950	1951
Scarlet Fever	221	77	70	48
Diphtheria	54	54	8	-
Erysipelas	21	11	17	13
Acute Primary Pneumonia	39	31	65	67
Acute Influenzal Pneumonia	14	4	2	6
Cerebrospinal Fever	8	11	2	-
Dysentery	3	15	8	81
Enteric Fevers	1	4	1	-
Paerperal Fever and Pyrexia	5	5	3	2
Ophthalmia Neonatorum	1	1	1	-
Poliomyelitis	-	-	18	2
Acute Infectious Jaundice	-	-	-	1
Whooping Cough	-	-	-	429
Malaria	-	-	1	1

Comentary.

Scarlet Fever notifications increased slightly and remains of a mild type.

The Pneumonias were notified at a rate very slightly above the quinquennial average.

Dysentery notifications were by far the highest ever recorded. In addition to the 81 notifications there were some thirty known cases not notified by their doctors. The disease was of a mild type, and the outbreak was confined to the early months of the year.

There were no notifications of Diphtheria, Cerebrospinal Fever, Enteric, or Ophthalmia Neonatorum.

It is possible that no more than half the cases of Whooping Cough were notified.

From the foregoing, it will be appreciated that the number of cases notified reflects a satisfactory state of well-being in the community. But one is left with the query whether notification is as faithfully carried out as it is. To some extent, incomplete notification in the milder conditions like whooping cough and dysentery is understandable. The doctor may not see the patient till he is better, or may get laboratory confirmation of the nature of the disease after the patient is back at work. Under such circumstances the busy general practitioner may see fit to omit a notification. It cannot be too strongly stressed, however, that the Health Department of Local Authority is utterly dependent on outside sources for its information, and is virtually paralysed by the lack of it. From the general practitioners point of view, the isolation of hospitalisation, and treatment of his case is the be-all and end-all. From the point of view of the Medical Officer of Health, it is only the beginning.

Before closing this section of the Report, three occurrences should receive passing notice.

1. Smallpox.

At the beginning of January 1951, word was received that an R.A.F. Officer who had been at Kinloss within the previous few weeks was in hospital in Brighton with modified smallpox. By that time it was clear that virtually everyone in the Air Station was a potential contact, so mass vaccination was undertaken. Many men were on leave and were instructed by the R.A.F. authorities to secure the protection of vaccination forthwith. The close contacts of this officer, numbering five, were vaccinated and placed under surveillance. The officer's uniform was disinfected. At the same time there was a great demand from the civilian populace for vaccination. It is not clear whether the precautions taken in connection with contacts, or the relative uninfectivity, while at Kinloss, of the original case were the chief factors in preventing any local spread of the disease. The lesson, however, is undoubtedly that infant vaccination very largely prevents death from smallpox in later life, and also that it prevents post-vaccinal encephalitis, a dangerous complication liable to attack those vaccinated for the first time after the age of ten or twelve years.

2. Influenza.

In December 1950, and in January 1951, there was a considerable outbreak of influenza in Moray and Nairn. Fortunately the disease was of a relatively mild type unlike that which attacked Merseyside.

3. Bornholm Disease.

In the summer and autumn of 1951 it became apparent that this disease was unusually prevalent. The causal organism is unknown, though there are some pointers towards a particular group of viruses. As a result of this, measures to prevent the spread of infection are impracticable, and the health officer is confined to observation of the condition and its behaviour in the populace. These observations were published in a short article in the Health Bulletin of the Department of Health for Scotland.

MENTAL HEALTH SERVICES.

<u>Certification of Lunatics.</u>	<u>M.</u>	<u>F.</u>
Certifications in 1951	14	14

<u>Removals.</u>	<u>M.</u>	<u>F.</u>
To Aberdeen R.M. Hospital	-	1
To Morayshire Mental Hospital	10	9
To Craig Dunain	<u>4</u>	<u>4</u>
Total	14	14

Investigation of Homes of Lunatics about to be Discharged.

No. of investigations in 1951.	2	3
--------------------------------	---	---

Boarded-out Mentally Defectives.

Defectives from Moray and Nairn.	7	7
Defectives from other areas.	<u>1</u>	<u>3</u>
Total	8	10

Mental Defectives in Institutions.

New cases admitted.	-	-
Discharged to Moray and Nairn.	-	-
Died	-	-

Boarded-out Lunatics.

Under supervision in 1951.	9	7
Total		

PORT HEALTH ADMINISTRATION.

Three ships from foreign ports called at ports in Moray and Nairn. No action fell to be taken under the Port Sanitary Regulations (Scotland) 1933-1945. No fumigations were carried out, and no certificates in connection with deratisation were issued.

There is no civil airport in Moray and Nairn and no action was required in connection with aircraft from foreign airports.

FOOD SUPPLIES.

1. Milk.

Details concerning the supervision of milk supplies are to be found in the Annual Report of the County Sanitary Inspector.

Over four-fifths of all milk, produced in the registered dairies in Moray and Nairn, comes from dairies which hold designated licenses. Of the dairies which do not reach this standard, several are conducted in connection with attested herds. There is an increasing tendency for the small, unregistered producer to go out of business, owing to the difficulty in finding persons willing to milk cows.

2. Ice cream.

A satisfactory standard has been maintained.

3. Meat and Other Foods.

Over twenty-one tons of unsound meat was condemned at the four slaughterhouses in the Combined County. This quantity is slightly greater than in the previous year.

Over three and a half tons of other foodstuffs were found to be unsound, and condemned.

4. Food Poisoning.

No outbreak of food poisoning was reported in 1951.

5. Nutrition.

A satisfactory standard of nutrition was maintained.

MISCELLANEOUS.

1. Nursing Homes Registration (Scotland) Act.

One nursing home, previously registered, continued to be operated satisfactorily.

2. National Assistance Act, 1948.

One home for disabled persons, previously registered, continued to be operated satisfactorily.

GENERAL SANITATION.

Water Supplies.

By the end of 1951, the main water-pipe from the intake at Glenlatterach to New Elgin was nearly complete, and a start was made with the impounding dam...

Although plans are well advanced for the similar scheme, based on the Forres water undertaking, a start has been put off by the Department of Health for Scotland. It is understood that pipes are on order for delivery in 1954.

The quality of water supplied has been satisfactory. Quantities will, however, be liable to run short in some areas from time to time. This state of affairs, which must cause concern, will continue until the various schemes planned have been completed.

In connection with water supplies, as with housing, the startling increase of population of recent years must be borne in the minds of those planning water supplies. There are between seven thousand and eight thousand more people in Moray and Nairn now than there were immediately before the war.

Drainage Schemes.

A new drainage scheme at Lhanbryde came into use.

Concern must be expressed at the delay in sanctioning ^{ing the commencement of the} scheme. ^{provision drainage} Whatever the past history of the village may have been, its present insanitary state is the responsibility of the Department of Health for Scotland.

River Pollution.

There is no change to note in the state of pollution of the River Lossie. The replacement of the sewage disposal works at Elgin, by a new plant, remains the only remedy, and is in hand.

Cleansing and Refuse Disposal.

Very satisfactory progress has been made with the rural cleansing service.

The services in the Burghs calls for no special comment.

Housing.

In respect of the rate of construction, there is nothing new to add. Though it is as well to repeat the previous statement that barely one application in ten, of those already lodged, can be expected to lead to rehousing.

Some comment on the selection of tenants seem called for. The category which appears to call for the most urgent and sympathetic consideration comprises the homeless. Following hard upon their heels are those who occupy unfit houses. If the houses are unfit for those re-housed, they are unfit for any other occupants, and in the interests of the health of the community, as well as the individual, their re-occupation must be vetoed. The overcrowded form the next category. When they are re-housed, steps should be taken to see that the houses vacated are not immediately overcrowded again. It has to be admitted that in some places conditions other than those mentioned are influencing the choice of tenants, sometimes to the exclusion of those in one of these categories. The attention of the Housing Authorities has, no doubt, only to be drawn to the matter for it to be remedied.

LABORATORY SERVICES.

Samples dealt with at the City Hospital Laboratory, Aberdeen.

	Average 1936 to 1940.	Average 1941 to 1945.	Average 1946 to 1950.	1951
Diphtheria	1165.8	1346.6	482	128
Upper Respiratory Infections	-	-	120	193
Whooping Cough	-	-	-	1
Bacillary Dysentery	34.8	90.6	85	152
Enteric and Food Poisoning	65.6	94.8	54	23
Gastro-enteritis of Infants	-	-	2	12
Tuberculosis	208.0	220.8	414	612
Tuberculosis, Animal Inoculations	29.2	53.8	62	148
Venereal Diseases	430.2	583.6	777	729
Leptospiral Infections	1.0	1.2	2	-
Undulant Fever	17.2	20.6	27	19
Glandular Fever	-	-	5	8
Virus Diseases	-	-	3	2
General	1292.8	2052.6	976	618
Water	-	-	120	135
Water (chemical)	-	-	3	-
Milk	-	-	1195	1652
Milk (chemical)	-	-	160	-
Ice Cream	-	-	7	-
TOTAL				4332

The method of compiling the records have altered slightly, so that certain categories have been omitted. Totals recorded in previous years are therefore not related to the figures in the columns and are not included.

Table of Causes of Death.

	Average 1931 to 1940	Average 1941 to 1946	Average 1947 to 1950	1951
1. Tuberculosis of Respiratory System	17.8	14.67	18.25	15
2. Tuberculosis, other forms	6.7	6.8	4.0	-
3. Syphilis and its sequelae	-	2.3	0.5	1
4. Typhoid Fever	0.4	-	-	-
5. Dysentery, all forms	x	x	x	-
6. Scarlet fever and streptococcal sore throat	2.3	0.17	0.25	-
7. Diphtheria	2.4	1.67	0.2	-
8. Whooping cough	2.8	1.5	0.5	1
9. Meningococcal infections	1.0	0.67	0.25	-
10. Acute poliomyelitis	x	x	x	-
11. Measles	1.8	0.83	0.25	-
12. Other infectious and parasitic diseases	2.8	3.8	5.5	2
13. Malignant neoplasms	86.6	100.8	101.5	89
14. Benign and unspecified neoplasms	-	2.0	1.25	2
15. Diabetes mellitus	6.9	7.5	4.5	8
16. Anemias	x	x	x	4
17. Other general diseases	16.1	11.0	9.0	4
18. Vascular lesions affecting central nervous system	90.8	101.67	97.75	120
19. Nonmeningococcal meningitis	-	4.5	1.0	1
20. Other diseases of nervous system	20.5	15.2	9.5	15
21. Rheumatic fever	-	1.5	0.75	-
22. Chronic rheumatic heart disease	x	x	x	13
23. Arteriosclerotic and degenerative heart disease	139.0 ^A	169.8 ^A	212.75 ^A	220
24. Other disease of heart	x	x	x	9
25. Hypertension with heart disease	x	x	x	11
26. Hypertension without heart disease	23.0 ^A	17.3 ^A	15.75 ^A	12
27. Other circulatory disease	14.9	4.34	5.0	9
28. Influenza	32.4	21.5	22.25	13
29. Pneumonia	26.5	18.0	12.25	13.5
30. Bronchitis	11.9	10.0	10.0	5
31. Other respiratory diseases	6.5	8.2	5.0	6
32. Ulcer of stomach and duodenum	4.8	3.34	2.5	1
33. Appendicitis	x	x	x	5
34. Intestinal obstruction and hernia	x	x	x	-
35. Gastritis and duodenitis	x	x	x	-

continued on page facing.

Table of Causes of Death (continued)

	Average 1931 to 1940	Average 1941 to 1946	Average 1947 to 1950	1951
36. Diarrhoea (except of new born)	x	x	x	1
37. Arrrhosis of liver	1.6	1.34	2.0	-
38. Other diseases of liver	3.6	2.8	2.75	3
39. Other digestive diseases	12.2	13.0	11.5	2
40. Nephritis and nephrosis	16.3	14.5	12.75	3
41. Hyperplasia of prostate	x	x	x	6
42. Other diseases of genito urinary system	12.5 ^A	11.5 ^A	9.5 ^A	5
43. Puerperal sepsis including post abortive sepsis	0.8	1.67	0.25	-
44. Other puerperal causes	3.4	2.0	1.5	-
45. Diseases of skin and organs of locomotion	3.7	2.5	1.5	-
46. Congenital malformations	x	x	x	5
47. Birth injuries, post natal asphyxia and atelectasis	x	x	x	8
48. Pneumonia of new born	x	x	x	1
49. Diarrhoea of new born	x	x	x	-
50. Other infections of new born	x	x	x	-
51. Other diseases peculiar to early infancy	x	x	x	11
52. Senility	43.1	31.7	8.0	9
53. Cause ill-defined or unknown	9.0	10.9	12.5	9
54. Suicide	3.8	3.0	3.5	4
55. Motor vehicle accidents	} -	} 8.0	} 7.25	6
56. Other road transport accidents				1
57. Other violence	15.0	19.0	12.5	37
TOTAL	685.8 ^B	692.37 ^B	675. B	704

x not recorded separately

A included more than now assigned to this category

B total average of deaths, not total of entries in column.

Table of Distribution of Cases.

	County of Moray	Burgh of Elgin	Burgh of Forres	Burgh of Grantown	Burgh of Lossiemouth	Burgh of Rothes	Burgh of Burghead	County of Nairn	Burgh of Nairn	TOTAL
Scarlet Fever	25	17	1	1	-	3	1	-	-	48
Diphtheria	-	-	-	-	-	-	-	-	-	-
Erysipelas	6	4	-	-	-	-	-	2	1	13
Acute Primary Pneumonia	31	14	1	-	7	5	3	4	2	67
Influenzal Pneumonia	1	1	-	-	1	-	1	1	1	6
Cerebro- spinal Meningitis	-	-	-	-	-	-	-	-	-	-
Poliomyelitis	2	-	-	-	-	-	-	-	-	2
Dysentery	46	15	4	-	1	-	-	1	14	81
Paratyphoid B	-	-	-	-	-	-	-	-	-	-
Whooping Cough	155	138	3	9	54	-	4	31	35	429
Puerperal Pyrexia	1	1	-	-	-	-	-	-	-	2
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-
Infective Jaundice	-	-	-	-	-	-	-	1	-	1
Malaria	1	-	-	-	-	-	-	-	-	1
Pulmonary Tuberculosis	31	15	8	2	9	4	2	6	6	83
Non-Pulmonary Tuberculosis	6	2	-	-	2	-	1	2	3	16
TOTAL	305	207	17	12	74	12	12	48	62	749

Table of Seasonal Incidence

	Scarlet Fever	Diphtheria	Erysipelas	Acute Primary Pneumonia	Influenzal Pneumonia	Cerebro-spinal Meningitis	Poliomyelitis	Dysentery	Paratyphoid B.	Whooping Cough	Puerperal Pyrexia	Ophthalmia Neonatorum	Infective Jaundice	Malaria	Pulmonary Tuberculosis	Non-pulmonary Tuberculosis	TOTAL
January	5	-	2	8	1	-	-	9	-	11	-	-	-	-	5	-	41
February	5	-	-	7	1	-	1	17	-	7	-	-	-	-	14	2	54
March	6	-	1	9	2	-	-	39	-	13	-	-	-	-	20	2	92
April	3	-	-	7	-	-	-	12	-	9	1	-	-	-	5	2	39
May	4	-	3	7	-	-	-	-	-	21	1	-	-	-	8	2	46
June	-	-	-	7	-	-	-	4	-	29	-	-	-	-	2	1	43
July	-	-	-	6	-	-	-	-	-	9	-	-	-	1	8	2	26
August	-	-	1	1	1	-	1	-	-	71	-	-	-	-	4	1	80
September	14	-	-	1	-	-	-	-	-	69	-	-	1	-	4	1	90
October	4	-	3	3	-	-	-	-	-	105	-	-	-	-	3	-	118
November	3	-	1	6	1	-	-	-	-	20	-	-	-	-	6	2	39
December	4	-	2	5	-	-	-	-	-	65	-	-	-	-	4	1	81
TOTAL	48	-	13	67	6	-	2	81	-	429	2	-	1	1	83	16	749

Age Incidence and Number of Removals to Hospital.

DISEASE	All Ages	Under 1	1 - 4	5 - 14	15 - 24	25 - 34	35 - 44	45 - 64	65 and Over	To Hospital	Not to Hospital
Scarlet Fever	48	1	14	21	10	2	-	-	-	35	13
Diphtheria	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	13	-	-	-	3	-	1	6	3	7	6
Acute Primary Pneumonia	67	8	6	10	10	6	2	16	9	52	15
Influenzal Pneumonia	6	1	1	-	1	-	-	1	2	4	2
Cerebro-spinal Meningitis	-	-	-	-	-	-	-	-	-	-	-
Polio-myelitis	2	1	-	-	1	-	-	-	-	2	-
Dysentery	81	-	22	22	8	12	7	7	3	1	80
Paratyphoid B.	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	429	46	214	163	1	2	2	1	-	3	426
Puerperal Pyrexia	2	-	-	-	-	2	-	-	-	2	-
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-
Infective Jaundice	1	-	-	-	-	-	-	1	-	1	-
Malaria	1	-	-	-	1	-	-	-	-	-	1
Pulmonary Tuberculosis	83	-	-	6	34	20	10	11	2	46	37
Non-pulmonary Tuberculosis	16	1	1	3	4	2	4	-	1	6	10
TOTAL	749	58	258	225	73	46	26	43	20	159	590

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